

State of Colorado
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403955168

Date Received:
10/14/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 76840
Name of Operator: SCHNEIDER ENERGY SERVICES INC
Address: P O BOX 889
City: FORT MORGAN State: CO Zip: 80701

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
SCHNEIDER, JEFF	970-867-9437	jeff@schneiderenergy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 708201526
Inspection Date: 08/19/2024 FIR Submit Date: 08/21/2024 FIR Status:

Inspected Operator Information:

Company Name: SCHNEIDER ENERGY SERVICES INC Company Number: 76840
Address: P O BOX 889
City: FORT MORGAN State: CO Zip: 80701

LOCATION - Location ID: 313900

Location Name: KNAPPE-66N60W Number: 7SWSW County:
Qtrqtr: SWS Sec: 7 Twp: 6N Range: 60W Meridian: 6
W
Latitude: 40.497786 Longitude: -104.145083

FACILITY - API Number: 05-087-00 Facility ID: 313900

Facility Name: KNAPPE-66N60W Number: 7SWSW
Qtrqtr: SWS Sec: 7 Twp: 6N Range: 60W Meridian: 6
W
Latitude: 40.497786 Longitude: -104.145083

CORRECTIVE ACTIONS:

1 CA# 197889

Corrective Action: Comply with Rule 1004. Original corrective action date of 08/23/2023 (when the location was first observed out of compliance) remains. Date:

Response: CA COMPLETED Date of Completion: 10/09/2024

Operator Comment: Removal of debris equipment completed on 9/10/24. Picture attached. Operator has completed the initial phase of recontouring and grading the location to reflect adjacent topography, in compliance with Rule 1004. Road base material was removed, and location was graded on 10/9/2024.

ECMC Decision: _____

ECMC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: All actions to achieve passing status of this inspection have been completed.

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I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Jessica Donahue

Signed: _____

Title: Compliance Specialist

Date: 10/14/2024 7:26:40 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on ECMC website (<http://ecmcweblink.state.co.us/>) - Search by Document Number.

Document Number **Description**

403955175	Photo Log
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Total Attach: 1 Files